

### THIRD SUPPLEMENTAL APPLICATION DATA SHEET

#### APPLICATION INFORMATION

Application number::	10/577,814
Filing Date::	November 1, 2004
Application Type::	Nonprovisional
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?:	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?:	
Computer Readable Form (CRF)?:	
Number of copies of CRF::	
Title::	METHOD OF TREATING AND PREVENTING ISCHEMIA-REPERFUSION INJURY USING RNA INTERFERING AGENT
Attorney Docket Number::	033393-055222
Request for Early Publication?:	
Request for Non-Publication?:	
Suggested Drawing Figure::	
Total Drawing Sheets::	9
Small Entity?:	Yes
Latin name::	
Variety denomination name::	
Petition included?:	

Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent App.?:	

# **APPLICANT INFORMATION**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	<u>Full Capacity</u>
Given Name::	Judy
Middle Name::	
Family Name::	Lieberman
Name Suffix::	
City of Residence::	Brookline
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	63 Buckminster Road
City of mailing address::	Brookline
State or Province of mailing address::	MA
Country of mailing address::	US
Postal or Zip Code of mailing address::	02445

Applicant Authority Type::	Inventor
Primary Citizenship Country::	HU
Status::	<u>Full capacity</u>
Given Name::	Péter
Middle Name::	

Family Name::	Hamar
Name Suffix::	
City of Residence::	Budapest
State or Province of Residence::	
Country of Residence::	HU
Street of mailing address::	Szalmás Piroška u 2/b
City of mailing address::	Budapest
State or Province of mailing address::	
Country of mailing address::	HU
Postal or Zip Code of mailing address::	H-1068

Applicant Authority Type::	Inventor
Primary Citizenship Country::	CN
Status::	<u>Full capacity</u>
Given Name::	Erwei
Middle Name::	
Family Name::	Song
Name Suffix::	
City of Residence::	<del>Guang-Dong</del> <u>Guangzhou</u>
State or Province of Residence::	Guangdong
Country of Residence::	CN
Street of mailing address::	Room 502, No. 8, Suihua El- Xiang, Jiangnan ekada <u>Dadao</u> Zhong
City of mailing address::	Guangzhou
State or Province of mailing address::	Guangdong
Country of mailing address::	CN

Postal or Zip Code of mailing address::	
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# **CORRESPONDENCE INFORMATION**

Correspondence Customer Number::	50828
Name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	
Fax number::	
E-Mail address::	<a href="mailto:bostonpatent@nixonpeabody.com">bostonpatent@nixonpeabody.com</a>

# **REPRESENTATIVE INFORMATION**

Representative Customer Number::	50828
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**OR**

Representative Designation::	Registration Number::	Representative Name::
Attorney of Record		
Attorney of Record		
Agent		
Agent		
Attorney of Record		

Agent		
Attorney		

#### **DOMESTIC PRIORITY INFORMATION**

Application:: Type::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is	a 371 National Stage of	PCT/US2004/036200	2004-11-01
PCT/US2004/036200 is a	non provisional of	60/516172	2003-10-30

#### **FOREIGN PRIORITY INFORMATION**

Country::	Application number::	Filing Date::	Priority Claimed::

#### **ASSIGNEE INFORMATION**

Assignee name::	Immune Disease Institute, Inc.
Street of mailing address::	800 Huntington Avenue
City of mailing address::	Boston
State or Province of mailing address::	Ma
Country of mailing address::	US
Postal or Zip Code of mailing address::	02115

Date: July 28, 2008

Respectfully submitted,

Customer No. 50828

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